

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**May 29 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000016754 (2)

1. Corporation Name
EMPIRE TECHNOLOGIES INC.



Principal Place of Business
**1801 NORTH 31ST AVENUE
HOLLYWOOD FL 33021**

Mailing Address
**1801 NORTH 31ST AVENUE
HOLLYWOOD FL 33021-4405**

3. Date Incorporated or Qualified
02/26/1993

3a. Date of Last Report
02/14/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 2111 North 31 Ave.		26		65-0395032		Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State Hollywood - FL		27 City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip 33021		25 Country U.S.A		29 Zip		30 Country	
7. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

**REZENDE, EDIVALDO
1801 NORTH 31ST AVE
HOLLYWOOD FL 33021**

81 Name **EDIVALDO REZENDE**

82 Street Address (P.O. Box Number is Not Acceptable)
2111 North 31 Ave

83

84 City **Hollywood** FL 85 Zip Code **33021**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: **EDIVALDO REZENDE** *[Signature]* **PRESIDENT** DATE: **05/21/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD <input type="checkbox"/> DELETE	1.1 TITLE	PSTD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REZENDE, EDIVALDO	1.2 NAME	REZENDE, Edivaldo
STREET ADDRESS	1801 NORTH 31ST AVE.	1.3 STREET ADDRESS	2111 NORTH 31 AVE
CITY-ST-ZIP	HOLLYWOOD FL 33021	1.4 CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **EDIVALDO REZENDE** *[Signature]* DATE: **05/21/97** DAYTIME PHONE: **(305) 5139788**

CR2E034 (9/96)